

Please type a plus sign (+) inside this box →

PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

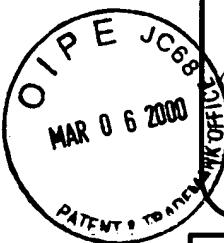
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

#3

+

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)



Total Number of Pages in This Submission

6

Application Number	09/477,876
Filing Date	01/05/00
First Named Inventor	Herring et al.
Group Art Unit	2739
Examiner Name	Not assigned yet

Attorney Docket Number

P04658

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John L. Maxin National Semiconductor Corporation
Signature	
Date	28 Feb 2000

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	John L. Maxin
Signature	
Date	28 Feb 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

+

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$ 130)

Complete if Known

Application Number	09/477,876
Filing Date	01/05/00
First Named Inventor	Herring et al.
Examiner Name	Not assigned yet
Group / Art Unit	2739
Attorney Docket No.	P04658

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 140448
Deposit Account Name National Semiconductor Corporation

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

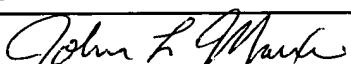
2. Payment Enclosed:
 Check Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee	Fee	Fee	Fee Description	Fee Paid
105	130	205	65		Surcharge - late filing fee or oath	130
127	50	227	25		Surcharge - late provisional filing fee or cover sheet	
139	130	139	130		Non-English specification	
147	2,520	147	2,520		For filing a request for reexamination	
112	920*	112	920*		Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*		Requesting publication of SIR after Examiner action	
115	110	215	55		Extension for reply within first month	
116	380	216	190		Extension for reply within second month	
117	870	217	435		Extension for reply within third month	
118	1,360	218	680		Extension for reply within fourth month	
128	1,850	228	925		Extension for reply within fifth month	
119	300	219	150		Notice of Appeal	
120	300	220	150		Filing a brief in support of an appeal	
121	260	221	130		Request for oral hearing	
138	1,510	138	1,510		Petition to institute a public use proceeding	
140	110	240	55		Petition to revive - unavoidable	
141	1,210	241	605		Petition to revive - unintentional	
142	1,210	242	605		Utility issue fee (or reissue)	
143	430	243	215		Design issue fee	
144	580	244	290		Plant issue fee	
122	130	122	130		Petitions to the Commissioner	
123	50	123	50		Petitions related to provisional applications	
126	240	126	240		Submission of Information Disclosure Stmt	
581	40	581	40		Recording each patent assignment per property (times number of properties)	
146	760	246	380		Filing a submission after final rejection (37 CFR 1.129(a))	
149	760	249	380		For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) _____						
Other fee (specify) _____						
SUBTOTAL (2) (\$)				SUBTOTAL (3) (\$)		
Reduced by Basic Filing Fee Paid				130		

SUBMITTED BY

Typed or Printed Name	John L. Maxin	Complete (if applicable)
Signature		Reg. Number 34,668

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

#3

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO/TITLE
09/477,876	01/05/00	HERRING	C P04658

09/477,876 01/05/00 HERRING

02/27/00

JOHN L. MAXIN
NATIONAL SEMICONDUCTOR CORPORATION
901 EAST CAMPBELL ROAD SUITE 525
AUSTIN, TX 75081

2739



DATE MAILED:

02/15/00

NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1:136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a small entity (statement filed) non-small entity is \$ 130.00.

1. The statutory basic filing fee is:
 missing.
 insufficient.

Applicant must submit \$ 130.00 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. The following additional claims fees are due:

\$ 130.00 for total claims over 20.

\$ 130.00 for independent claims over 3.

\$ 130.00 for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:
 is missing or unsigned.
 does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint-inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the reply.

[Signature]
Customer Service Center
Initial Patent Examination Division (703) 308-1202